

Client: Example Client ABC123
123 Test Drive
Salt Lake City, UT 84108
UNITED STATES

Physician: Doctor, Example

Patient: Patient, Example

DOB 3/15/1987

Gender: Male

Patient Identifiers: 01234567890ABCD, 012345

Visit Number (FIN): 01234567890ABCD

Collection Date: 00/00/0000 00:00

Heterophile Antibody (Infectious Mononucleosis) by Latex Agglutination Titer (Reflex for 2007697 HETER REF - Not orderable by clients)

ARUP test code 2007600

Heterophile Ab Titer **1:32** * (Ref Interval: < 1:1)

Heterophile Antibody (Infectious Mononucleosis) by Latex Agglutination with Reflex to Titer

ARUP test code 2007697

Heterophile Ab (Inf. Mono) LA, Qual **Positive** * (Ref Interval: Negative)

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Heterophile Ab Titer	19-251-108261	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00
Heterophile Ab (Inf. Mono) LA, Qual	19-251-108261	00/00/0000 00:00	00/00/0000 00:00	00/00/0000 00:00

END OF CHART

H=High, L=Low, *=Abnormal, C=Critical